

OFFICIAL FILE
ILLINOIS COMMERCE COMMISSION

Docket No. _____

ICC Office Use Only

Application for a certificate of
prepaid calling service provider authority
in the State of Illinois.

ORIGINAL
08-0255

APPLICATION TO OBTAIN A
"CERTIFICATE OF PREPAID CALLING SERVICE PROVIDER AUTHORITY"
(Use additional sheets as necessary.)

GENERAL

1. Applicant's Name (including d/b/a, if any)
iBasis Retail, Inc. d/b/a iBasis

FEIN # 26-0522833

Address: 20 Second Ave.

City: Burlington State/Zip: MA, 01803

Please complete the following with respect to the Applicant and Underlying Carrier:

2. Please provide the Applicant's toll-free customer service number.

1-877-291-9783

3. In what area or areas of the state does the Applicant propose to provide service?

iBasis Retail, Inc. intends to provide prepaid calling card services to the entire state. See attached pre-filed testimony at **Exhibit A** for additional information.

4. Please attach a sheet designating contact persons to work with Illinois Commerce Commission Staff on the following: See **Exhibit B**.

- a) issues related to processing this application
- b) consumer issues
- c) customer service complaint resolution
- d) technical and service quality issues and compliance with service quality standards and remedies
- e) "tariff" and pricing issues
- f) security/law enforcement

Please identify each contact person's (i) name, (ii) title, (iii) mailing address, (iv) telephone number, (v) facsimile number, and (vi) e-mail address.

5. Please check type of organization.

____ Individual X Corporation

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ILLINOIS
COMMERCE COMMISSION

____ Partnership

Date corporation was formed: June 29, 2007

In what state? Delaware

____ Other (Specify)

6. Submit a copy of articles of incorporation or other organization documents, a copy of any contract with any underlying carrier(s) and a copy of certificate of authority to transact business in Illinois. See **Exhibit C**.

7. List jurisdictions (other than Illinois) in which Applicant is offering service(s).

California, Florida, Texas, Utah, and Washington.

Currently seeking authorization in New York, Georgia, Colorado, Delaware, Maryland, Massachusetts, and West Virginia.

8. Has the Applicant, or any principal in Applicant, been denied a Certificate of Service or had its certification revoked or suspended in any jurisdiction in this or another name?

____ YES (Please provide details) X NO

9. Have there been any complaints or judgments levied against the Applicant in any other jurisdiction?

____ YES X NO

If YES, describe fully. _____

10. Has Applicant provided service under any other name?

____ YES X NO

If YES, please list. _____

11. Is the Applicant seeking an expedited application pursuant to Section 13-404.1(b)?

____ YES X NO

If YES, please provide the name of the underlying carrier(s) and the docket number of the underlying carrier(s) certification proceeding. _____

MANAGERIAL

12. Please attach evidence of the applicant's managerial and technical resources and ability to provide service. This may be in narrative form, resumes of key personnel, or a combination of these forms. See **Exhibit D**.

13. List officers or principals of Applicant.

Ofer Gneezy, Chief Executive Officer
Mark Flynn, Secretary
Richard Tennant, Chief Financial Officer

14. Does any officer or principals of Applicant have an ownership or other interest in any other entity, which has provided or is currently providing telecommunications services? ☒ YES ☐ NO

If YES, list entity. See public financial documents of iBasis Retail's parent company, iBasis, Inc., attached at **Exhibit E.**

15. How does Applicant propose to handle service complaints? (At a minimum, describe Applicant's internal process for complaint resolution, the complaint escalation process, the timeframe and process by which the customer is notified by Applicant that they may seek assistance from the Commission?)

See **Exhibit F.**

16. Does Applicant currently maintain service quality standards?

☒ YES ☐ NO

If YES, please attach what those standards are, any credits that may be issued for failures and how customers are notified.

See **Exhibit F.**

17. Will personnel be available at Applicant's business office during regular working hours to respond to customer inquiries about service or billing? ☒ YES ☐ NO

18. What telephone number(s) would a customer use to contact your company (other than the tollfree customer service number provided in response to question 1)?

781-505-7500

19. Is Applicant aware that it must file tariffs prior to providing service in Illinois?

☒ YES ☐ NO

FINANCIAL

20. Please attach evidence of Applicant's financial fitness through the submission of its most current income statement and balance sheet, or other appropriate documentation of applicant's financial resources and ability to provide service. See **Exhibit E.**

TECHNICAL

21. Does Applicant utilize its own equipment and/or facilities? ☒ YES ☐ NO

If YES, please list the equipment and / or facilities Applicant intends to utilize. Also include evidence that Applicant possesses the necessary technical resources to deploy and maintain said facilities:

iBasis Retail will maintain VoIP gateways and other routing-related equipment in Illinois that will facilitate the transport and termination of its traffic and will facilitate authentication and billing for prepaid calling cards. iBasis Retail will also utilize the facilities of other carriers certificated to provide telecommunications services in Illinois.

If NO, which underlying carrier's facilities does the Applicant intend to use?

Level 3, Qwest Global Crossing, and other certificated providers.

22. Please describe the nature of prepaid service to be provided (e.g., general service, location specific service, discounted rates for specific countries, etc.).

iBasis Retail will provide interexchange services in the form of prepaid calling cards.

23. Will technical personnel be available at all times to assist customers with service problems?

YES ☒ NO

See Quality of Service Standards/Measures at Exhibit F.

24. Please attach a copy of the front and back of any prepaid calling cards Applicant currently sells.

See Exhibit G.




(Signature of Applicant)

STATE OF *Massachusetts*
COUNTY OF *Middlesex* }

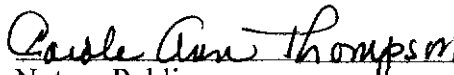
VERIFICATION

I, Mark Flynn, am authorized to represent iBasis Retail, Inc. and to make this verification on its behalf. The statements in the foregoing document are true of my own knowledge, except as to matters which are herein stated on information and belief, and as to those matters, I believe them to be true.

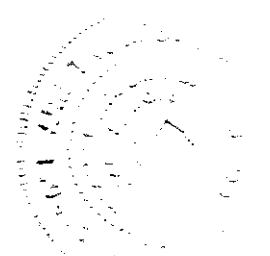


Name: Mark Flynn
Title: Chief Legal Officer and
Secretary

The foregoing instrument was acknowledged before me this 26th day of
February 2008.



Notary Public
my commission expires:
January 2, 2015



LIST OF EXHIBITS

Exhibit A - Pre-Filed Testimony

Exhibit B - Contact Information

Exhibit C - Articles of Incorporation and Certificate to Conduct Business

Exhibit D - Biographies

Exhibit E - Financial Documentation of iBasis, Inc.

Exhibit F - Quality of Service Standards/Measures

Exhibit G - Copies of Prepaid Calling Cards